



OFFICE OF THE ILLINOIS STATE FIRE MARSHAL
Division of Petroleum and Chemical Safety
1035 Stevenson Drive
Springfield, Illinois 62703-4259
(217)785-1020 or (217)785-5878

FOR OFFICE USE ONLY

Facility # _____

Permit # _____

APPLICATION for Permit for **REMOVAL** of Underground Storage Tanks. Submit application in triplicate, along with an application fee of **\$200.00** to: **Office of the State Fire Marshal, Division of Petroleum and Chemical Safety, 1035 Stevenson Drive, Springfield, IL 62703.** (Please type or print clearly)

(1) OWNER OF TANKS - Corporation, partnership, or other business entity: (Must be mailing address)

Name _____

Street Address _____

City _____ State _____ Zip _____

Contact Person _____ Phone _____

(2) FACILITY - Facility ID # _____
(Name and address where tanks are located:)

Name _____

Street Address _____

City _____ State _____ Zip _____ County _____

Contact Person _____ Phone _____

(3) CONTRACTOR: I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that all information submitted is true, accurate and complete.

Company Name _____ Address _____

City _____ State _____ Zip _____

Telephone # _____ Fax # _____ Contractor License # IL _____ Expiration Date _____

Name of Authorized Representative _____ Title or Position _____

Signature _____ Date _____

(4) TANK(S): Fill in the appropriate blanks for the tank(s) and/or associated piping to be removed. Attach additional sheet(s) if more space is needed.

Tank ID #	Capacity in gallons	Product	Date tank last used	Tank ID #	Capacity in gallons	Product	Date tank last used

(5) CONTAMINATED SITE (complete this section for sites where a release has been reported). Reminder: Releases or suspected releases must be reported to IEMA at (800)782-7860 immediately:

IEMA Incident # _____

6) REMOVAL WORK PERTAINS TO:

- ☐ Remove Tanks _____
- ☐ Remove Piping Only _____
- ☐ Remove Tanks and Piping _____

(7) Provide a SUMMARY OF WORK to be performed and explain any unusual circumstances on a separate sheet. Site plans used to illustrate removal work to be completed must be 8 ½ "x11" only.

The OSFM REQUIRES the disclosure of the requested information to issue this permit, pursuant to 430 ILCS, Act 15, Gasoline Storage Act. Failure to provide the requested information will result in this permit application not being processed. Such failure will result in the application being returned - it will be returned to the applicant only once (without being denied) and if resubmitted, is expected to be done within 14 days from the date of return.

(8) **APPLICATION REJECTION** - Insufficient information or illegibility can be cause for return or denial.

(9) **PERMIT TO WORK** - No work can proceed without a granted permit in hand and must be available upon request of the OSFM Storage Tank Safety Specialist.

(10) **CODE COMPLIANCE** - All work shall be performed per 41 IL. Adm. Code 174, 175, and 176 and shall otherwise be in compliance with any referenced codes and standards.

(11) **APPLICANT** - The ***RESPONSIBLE CONTRACTOR*** must complete this application. A fee of \$200.00 for each site must accompany this application. (Checks or money orders are to be made payable to the Office of the State Fire Marshal. Do not send cash).